26 11) Lawson 142 7 9/09

REQUEST

FOR

CONTINUED EXAMINATION (RCE)

JUL 0 1 2004

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

	11.000
Application Number	09/204,142 7 9/09
Filing Date	December 3, 1998
First Named Inventor	YUKO ARAI
Art Unit	2611
Examiner Name	LONSBERRY, Hunter B.
Attorney Docket Number	041-2048

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 C.F.R. §1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submis	ssion required under 37 C.F.R. §1.114	JUL 0 7 2004
	Previously submitted x Consider the amendment(s)/reply under 37 C.F.R. §1.116 pre	Technology Center 2600
i.	(Any un-entered amendment(s) referred to above will be entered).	
ii.	(Any un-entered amendment(s) reterred to above with the circles.) Consider the arguments in the Appeal Brief or Reply Brief pre	eviously filed on
iii.	Other:	
b. 🗆	Enclosed	01.15
ıi.		sclosure Statement (IDS)
ii.	Affidavit(s)/Declaration(s) iv. Other:	
2. Miscell	aneous	
	Suspension of action on the above-identified application is reque	sted under 37 C.F.R. §1.103(c) for
	a period of months. (Period of suspension shall not exce	ed 3 months; Fee under 37 C.F.R. §1.17(i) required)
ь. 🗆	Other	
3. Fees	The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §	1.114 when the RCE is filed.
3. 1 663		
a. 🛚	The Director is hereby authorized to charge any deficiency in the overpayments, to Deposit Account No. <u>07-1337</u>	Tollowing 1040, or are an array
i.	X RCE fee required under 37 C.F.R. § 1.17(e) -	\$770.00
ii.	X Extension of time fee (37 C.F.R. §§1.136 and 1.17) -	\$530.00
iii.	Other:	07/02/2004 CHGUYEN 00000102 09204142
b.· 📙	Check No. ————in the amount of \$1.300 is enclosed.	01 FC:1801 770.0 (
с. 🗆	Payment by Credit Card Form PTO-2038 enclosed.	ve ruiteds mation should not be included on this form.
WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
	The state of the s	AND THE PARTY OF T
	SIGNATURE OF APPLICANT, ATTORNEY, OR AC	SENTREQUIRED
	(Tuna) Michael G. Giliman Regist	ation No. (Attorney/Agent) 19,114
Name (Fillurype)		
Signature	Michael Paring Ca	July 1, 2004
CERTIFICATE OF MAILING OR TRANSMISSION		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in		
Trademark O	flice on the date shown below.	
Name_(Print	/Type) Date	
Signature	Date	